

PATENT APPLICATION FEE DETERMINATION RECORD
Effective January 1, 2003

Application or Docket Number

10-665-867

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	8	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	8 minus 20 =	0
INDEPENDENT CLAIMS	8 minus 3 =	5
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 9	Minus	** 20 = 0
Independent	* 8	Minus	*** 8 = 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

SMALL ENTITY TYPE	OTHER T SMALL E
RATE	RATE
BASIC FEE	375.00
X\$ 9=	
X42=	210
+140=	
TOTAL	585
OR	OR
BASIC FEE	
X\$18=	
X84=	
+280=	
TOTAL	

SMALL ENTITY	OTHER TH SMALL EN
RATE	RATE
ADDI- TIONAL FEE	
X\$ 9=	
X42=	
+140=	
TOTAL ADDT. FEE	
OR	OR
X\$18=	
X84=	
+280=	
TOTAL ADDT. FEE	

AMENDMENT B	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 5	Minus	** 20 = 0
Independent	* 5	Minus	*** 8 = 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

AMENDMENT B	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 5	Minus	** 20 = 0
Independent	* 5	Minus	*** 8 = 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

AMENDMENT C	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 0	Minus	** 0 = 0
Independent	* 0	Minus	*** 0 = 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

AMENDMENT C	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 0	Minus	** 0 = 0
Independent	* 0	Minus	*** 0 = 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.